

Seven Steps to Notifying Patients' Next of Kin January 24, 2005**By Janet Greenwald**

When an unconscious patient arrives in the emergency department (ED), every hospital agrees that timely next of kin notification is vital. It is important to have a family member present not only to comfort the patient, but also to make informed decisions for his care and provide the medical history that can make the difference between life and death. From a liability standpoint, as we know all too well, having a family member making medical decisions, often means that if complications do arise, the family will be much less likely to sue, than if they hadn't been in attendance. Although most hospitals make notification calls quickly, between personnel shortages and overworked staffers, that call can often be delayed or forgotten.

That's exactly what happened to Elaine Sullivan, a very active 71-year-old woman, who slipped and fell, while getting into the bathtub. When paramedics arrived, they realized that injuries to her mouth and head had made her unable to communicate, or, as the hospital later discovered, to give informed consent for her own care. Although stable for the first few days, she began to slip into critical condition. On the seventh day, Elaine died. But that tragedy was soon overshadowed by another.

Despite having her daughter's phone number and contact information clearly indicated on the front of her chart, the hospital failed to notify her family that she'd been hospitalized until six and a half days after her admission, only hours before she died, unnecessarily and alone.

Elaine Sullivan was my mother.

After researching our own case and others like it, we realized that failing to notify a patient's next of kin wasn't an isolated problem. According to the Centers for Disease Control and Prevention, nearly one million patients come into the ED every year unconscious or physically unable to give informed consent.

And with the growing number of ED admissions and baby boomers turning into senior citizens, the problem is only going to escalate. We began meeting with medical and trauma professionals, to create an easy-to-implement solution to this growing problem, by bringing together the best practices of successful trauma teams from hospitals nationwide. The result is the "Seven Steps to Successful Notification System."

The complete system is presented in The Seven Steps Information Kit, which is available for download, free of charge, on the Next of Kin educational project (NOKEP) Web site, www.nokep.org.

It's filled with tools your staff can use on the patient care floor to identify and locate your unconscious patient's family or surrogate decision makers, identify John Does and improve patient care and satisfaction by locating patient's medical histories quickly and easily, while complying with HIPAA standards.

Even better, following the Seven Steps system provides the facility with a documentation of the steps taken to find the patient's next of kin, make the notification, and the staff members responsible for making it. This releases you from subsequent liability, while providing proof that your facility has met its statutory responsibility.

Here is a quick look at the Seven Steps.

Step 1: Patient status confirmed. The moment that your staff realizes that an ED patient is unconscious or physically unable to give informed consent, and that there is no family member or surrogate decision maker in attendance, a nurse or physician is tasked with following the notification process through to completion. The staff member indicates the patient's status on his chart along with the time, date and the staffer's initials.

Step 2: Examine the patient's personal effects for emergency contact numbers. If the patient doesn't have emergency contact information in his or her wallet, the staff member looks for it in the patient's personal effects. The system has a comprehensive checklist of places to locate this information, from the usual to the downright creative.

Step 3: Retrieve patient's home number. If the patient doesn't have emergency contact information, the staff member then looks for the patient's home number, going to step five if they find it and four if they do not.

Step 4: Seek other sources for contact information. Next, the staff member looks for the patient's emergency contact information or home phone number on records from previous admissions at the facility, or by calling his personal physician's office, or other locations on the checklist. If the staff member finds the information, he proceeds to step five - if not, step seven.

Step 5: Oversee or make the notification call. When a contact has been identified, the staffer places a call to make the notification. They note on the chart when the call was placed, whom they contacted, the phone number and the result.

Step 6: Need to follow up? Re-call main contact or second number. If a message had to be left for the contact, or the contact doesn't come into the hospital within two hours, the staff member places one more call, to the first or a secondary contact. If no one is reached, the staff member proceeds to step seven.

Step 7: Shift to social service or police. When no contact name or number can be located, or if the staff member doing the notification is unable to speak directly to the contact, give the information to the social service department or to the local police department, as per your facility's policy, for follow up.

Along with the information kit, the non-profit NOKEP has created patient chart pages and notification worksheets using the Seven Steps, that you can purchase and customize to use as part of your own charting system. You'll find them on the NOKEP Web site along with reminder products like mouse pads, posters and coffee mugs to keep the Seven Steps at your staff's fingertips.

Just as doctors, nurses, and staffers from every department make up a team to improve the health of the patients in their care, family and friends can play an important part in contributing to the patient's well being. This kit contains tools that will help you and the family work together to increase care and trust, and take patient satisfaction to a whole new level.

Janet Greenwald is chief operating officer of the Next of Kin Education Project.

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